

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

10714677

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |               |                          |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     | 11            |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 11 minus 20 = | 8                        |
| INDEPENDENT CLAIMS               | 3 minus 3 =   | 0                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY  
TYPE  OR OTHER THAN  
SMALL ENTITY

| RATE      | FEES   | RATE         | FEES   |
|-----------|--------|--------------|--------|
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| XS 9=     | -      | OR XS18=     |        |
| X43=      | -      | OR X86=      |        |
| +145=     | -      | OR +290=     |        |
| TOTAL     | 385    | OR TOTAL     |        |

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A   | CLAIMS                    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDITIONAL FEE |
|---|---------------------------|------------------------------------|---------------|----------------|
|   | REMAINING AFTER AMENDMENT |                                    |               |                |
| Total   | 11 Minus                  | 20                                 | 8             |                |
| Independent   | 3 Minus                   | 3                                  | 0             |                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                           |                                    |               |                |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

| RATE            | ADDITIONAL FEE | RATE               | ADDITIONAL FEE |
|-----------------|----------------|--------------------|----------------|
| XS 9=           |                | OR XS18=           |                |
| X43=            |                | OR X86=            |                |
| +145=           |                | OR +290=           |                |
| TOTAL ADDT. FEE |                | OR TOTAL ADDT. FEE |                |

4/1-05

(Column 1) (Column 2) (Column 3)

| AMENDMENT B   | CLAIMS                    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDITIONAL FEE |
|---|---------------------------|------------------------------------|---------------|----------------|
|   | REMAINING AFTER AMENDMENT |                                    |               |                |
| Total   | 11 Minus                  | 20                                 | 8             |                |
| Independent   | 3 Minus                   | 3                                  | 0             |                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                           |                                    |               |                |

| RATE            | ADDITIONAL FEE | RATE               | ADDITIONAL FEE |
|-----------------|----------------|--------------------|----------------|
| XS 9=           |                | OR XS18=           |                |
| X43=            |                | OR X86=            |                |
| +145=           |                | OR +290=           |                |
| TOTAL ADDT. FEE |                | OR TOTAL ADDT. FEE |                |

9.15.05

(Column 1) (Column 2) (Column 3)

| AMENDMENT C   | CLAIMS                    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDITIONAL FEE |
|---|---------------------------|------------------------------------|---------------|----------------|
|   | REMAINING AFTER AMENDMENT |                                    |               |                |
| Total   | 8 Minus                   | 20                                 | 0             |                |
| Independent   | 3 Minus                   | 3                                  | 0             |                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                           |                                    |               |                |

| RATE            | ADDITIONAL FEE | RATE               | ADDITIONAL FEE |
|-----------------|----------------|--------------------|----------------|
| XS 9=           |                | OR XS18=           |                |
| X43=            |                | OR X86=            |                |
| +145=           |                | OR +290=           |                |
| TOTAL ADDT. FEE |                | OR TOTAL ADDT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
  - \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 8, enter "8".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.